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EXPRESS MAIL NO. EV889153293US

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number

FY 2005

481062.407

(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)

Application Number 10/622,559

Filed July 18, 2003

For METHOD FOR MAKING DIRECT MARKETING COMPOSITE MATERIALS AND BARCODE FOR COMPOSITE MATERIALS

Art Unit
1772

Examiner
Michael C. Miggins

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | <u>Fee</u> | <u>Small Entity Fee</u> | |
|--|------------|-------------------------|--------------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | <u>\$120</u> |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ _____ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ _____ |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| <input type="checkbox"/> The Director is hereby authorized to charge the above fees, or credit any overpayment, to Deposit Account Number <u>19-1090</u> . | | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71

Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration No. 47,028

☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34. _____

Eric M. Ringer, Ph.D.

Signature

Eric M. Ringer, Ph.D.

Typed or printed name

August 20, 2007

Date

206-622-4900

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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120.00 OP



EXPRESS MAIL NO. EV889153293US

**TRANSMITTAL
FORM**(To be used for all correspondence
after initial filing)

| | |
|----------------------|----------------------|
| Application Number | 10/622,559 |
| Filing Date | July 18, 2003 |
| First Named Inventor | Matthew Thomas Adams |
| Art Unit | 1772 |
| Examiner Name | Michael C. Miggins |
| Attorney Docket No. | 481062.407 |

ENCLOSURES (check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> After Allowance Communication to TC |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Request for Corrected Filing Receipt | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment/Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input checked="" type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address | <input checked="" type="checkbox"/> Return Receipt Postcard |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Declaration | <input type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>): |
| <input type="checkbox"/> Information Disclosure Statement and Transmittal | <input type="checkbox"/> Statement under 37 CFR 3.73(b) | _____ |
| <input type="checkbox"/> Cited References | <input type="checkbox"/> Terminal Disclaimer | _____ |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | _____ |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> CD, Number of CD(s) _____ | _____ |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Landscape Table on CD | _____ |

Remarks**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

| | | | |
|--------------|---|-----------------|--------|
| Firm Name | Seed Intellectual Property Law Group PLLC | Customer Number | 35243 |
| Signature | | | |
| Printed Name | Eric M. Ringer, Ph.D. | | |
| Date | August 20, 2007 | Reg. No. | 47,028 |

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

| | | |
|-----------------------|--|-------|
| Signature | | |
| Typed or printed name | | Date: |

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
1010960_1.DOC

Patent pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2007

Complete if Known

| | |
|----------------------|----------------------|
| Application Number | 10/622,559 |
| Filing Date | July 18, 2003 |
| First Named Inventor | Matthew Thomas Adams |
| Examiner Name | Michael C. Miggins |
| Art Unit | 1772 |
| Attorney Docket No. | 481062.407 |

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**120.00**

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☐ Charge any additional fee(s) or underpayments ☒ Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | _____ |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | _____ |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | _____ |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | Small Entity Fee (\$) |
|--|----------|-----------------------|
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| Total Claims | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims |
|-------------------------|--------------|----------|---------------|---------------------------|
| _____ -20 or HP = _____ | X | _____ | _____ | _____ |
| | | | | Fee (\$) |
| | | | | Fee Paid (\$) |

HP = highest number of total claims paid for, if greater than 20.

| Indep. Claims | Extra Claims | Fee (\$) | Fee Paid (\$) |
|------------------------|--------------|----------|---------------|
| _____ -3 or HP = _____ | X | _____ | _____ |

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------------|--------------|--|----------|---------------|
| _____ -100 = _____ | /50 = _____ | _____ (round up to a whole number) | x _____ | _____ |

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): _____

Petition for Extension of Time (1 month)

120

SUBMITTED BY

| | | | | | |
|-------------------|------------------------------|-----------------------------------|-----------------|-----------|--------------|
| Signature | <i>Eric M. Ringer, Ph.D.</i> | Registration No. (Attorney/Agent) | 47,028 | Telephone | 206-622-4900 |
| Name (Print/Type) | Eric M. Ringer, Ph.D. | Date | August 20, 2007 | | |